

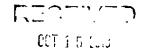
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TO:

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INHS18 (2/14)

TO:	Registration Section Division of Corporations	
SUBJI	ECT: ZULETA ENTE	ERPRISES LLC
	Name of Limite	ed Liability Company
Dear S	ir or Madam:	
The en	nclosed Registered Agent/Registered Office Change	and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to	the following:
	Name of Person	
	ZULETA ENTERPRISES L	LC
	Firm/Company	
18	3251 PARKRIDGE COURT	
	Address	
Ħ.	MYERS FL 33908 City/State and Zip Code	
	City/State and Zip Code	
	ZULY15 CCN & YAHOO. CON E-mail address: (to be used for future annual report i	<u>1</u>
ta	z-mail address: (to be used for future annual report i	notification)
For fur	rther information concerning this matter, please call	:
7	Name of Person	39, 281-7556
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:	MAILING ADDRESS:
	Registration Section Division of Corporations	Registration Section Division of Corporations
	Clifton Building	P.O. Box 6327
	2661 Executive Center Circle	Tallahassee, Florida 32314
	Tallahassee, Florida 32301	
	Enclosed is a check for the following amount:	

\$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

l. Na	me of the limited liability company:	ETA ENTE	ERPRISES, LL	<u> </u>
2. (a)	ZULETA ENTERPRISES.	LLC (b)		
() .	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited (Note: MAY BE POST	
	18251 PARKRIDGE COUL	<i>2T</i>		
	FT. MYERS, FL 33908	<u> </u>		
	09/28/2012 Date of filing/registration in Florida	L	_120001242	46
3.		4.	Document number	
5. (a)	JULIO E. ZULETA			
(/	Registered Agent and Registered Office shown on the recor	rds of the Florida Dept.	of State;	
				FILE PH 2:45
	Registered Office Address (MUST BE FLORIDA STR	EET ADDRESS)		
	·	-	(孫 3 =
	5810 CORDWOOD LANE			5
	FT. MYERS	.FL 339	19	52 - N
	•	_,,,,,	· · · · · · · · · · · · · · · · · · ·	SAR = C
(b)	TUHO E. ZULETA			wo is
` '	Enter name of NEW Registered Agent and/or NEW Registered	stered Office address:		严重
				C .,
	1825/ PARKRINGE C	POURT		
	NEW Registered Office Address:			
	18251 PARKRIDGE C	OURT		
			a 0	
	FT. MYERS	_, FL <i>3396</i>	<u>98</u>	
If the li	mited liability company is not organized under the	he laws of the State	of Florida, it is hereby con	firmed that after
the char	nge or changes are made, the Florida street addre	ess of the registered	office and the business off	ice of the registered
agent w	vill be identical. Or, in the case of a Florida limit re authorized by an affirmative vote of the members.	ted liability compar	ny, it is hereby confirmed the	at the change(s)
the artic	cles of organization or the operating agreement of	of the limited liability	ty company.	wise provided in
_				t-714
Signat	ure of a member or authorized representative of a member		1L10 E. ZUL Printed or typed name of	signee
I hereb	by accept the appointment as registered agent an	d aoree to act in th	is canacity. I further agree	to comply with the
provision the oblicito mere	ons of all statutes relative to the proper and comigations of my position as registered agent as pro By reflect a change in the registered office addre	pleie performance o wided for in Chapt ss, I hereby confirn	of my duties, and I am famil er 605, F.S. Or, if this doci n that the limited liability co	iar with and accept ment is being filed ompany has been
попуща	Vin writing of this change.			
Signatur	re of Registered Agent	_		